

AFC Unit _____

A35.300EH

APPOINTMENT REQUEST FORM EXTRA HELP

Name _____ Position Number _____

Address _____ (Verify With Employee)

Effective Date _____ Hourly Rate \$ _____

Total Hours Approved For This Employee _____

From: _____ Through _____

Date _____ Signature _____

Unit Manager

ATTACHMENTS (as applicable):

A35.100 EH Approved Position Request form to hire Extra Help

A35.201 Criminal Background Check Consent Form¹

A35.209 Statement of Selective Service

A35.305 Citizenship Status Federal I-9 Form, revision date 3/08/13

A35.307 Residency Certification (emergency response employees only)

Emergency response extra-help new hires: residency requirement verified by supervisor,
initial here _____

A130.100 Acceptance of Privilege To Operate A State Vehicle & Traffic Violation
Report, attach copy of Driver's License ¹

Employee Disclosure Forms F-3 through F-8

P200 Direct Deposit Form (mandatory), with copy of voided check

P300 Mandatory Direct Deposit Notification (interview process requirement) ²

Employment Application

A85.100 Physical Examination Report **and**

A85.400(b) New Hire Medical Clearance Statement (**emergency response new hires
only**)

A160.200 U.S. Department of Justice Public Safety Officer Beneficiary Form (fire
fighters only)

APERS Employee Exclusion Acknowledgement, **copy of Social Security Card
required**

A170.100 Acknowledgement of Receipt of Policy § 170, A170.100

A205.100 Code of Ethics Acknowledgement Form

State (AR4EC) and Federal (W-4) Exemption Forms (new hire only)

Arkansas Diamond Deferred Compensation Auto Enrollment Opt Out form

Revised: 1/28/2014

¹ Submit to AFC HR Dept for background check *before* job offer

² To request Direct Deposit Hardship Exemption complete Form OPM 236-B

HR Use Only:

AASIS # _____ FC # _____ Drivers _____ Wex _____ Dispatch _____ Disclosure _____ Background _____

Cost Center _____